(c) and (d) The audit of Employee Health Scheme is periodically being earned out, alongwith other departments/sections by statutory audit and the observations, if any, are taken care of by the Institute.

Malaria problematic towns in Maharashtra

3942. SHRI B. P. APTE: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government have identified hard core malaria districts and malaria problematic towns in Maharashtra;

(b) if so, the details thereof; and

(c) the steps Government propose to take to eradicate malaria from such areas of the States?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) and (b) Yes, Sir, Navi Mumbai and 15 districts namely Ahmednagar, Amravati, Bhandara, Chandrapur, Dhule, Gadchiroli, Jalgaon, Nagpur, Nanded, Nasik, Palghat, Pune, Raigarh, Thane and Yavatmal have been identified as hardcore malaria areas in the State of Maharashtra.

(c) For control of malaria and related deaths, National Anti-malaria Programme (NAMP) has been in operation in the country as a Category-ll Centrally Sponsored Scheme. The Central Govt, provides assistance to the States in the form of drugs, insecticides and larvicides. In addition, an Enhanced Malaria Control Project (EMCP) with World Bank support in predominantly tribal areas of 8 States including Maharashtra ' is being implemented for control of Malaria since September, 1997. The strategies for control of malaria are to provide anti-malaria drugs for early treatment through health facilities and community volunteers and integrated vector control which include indoor residual spray in the high risk poGkets in rural areas, laravicides in urban areas, use of insecticide treated bednets, larvivorous fish and environmental measures.

Survey on number of fake doctors.

3943. DR. C. NARAYANA REDDY: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether the Indian Medical Association has conducted any survey on the number of fake doctors in the country;

(b) the norms followed In the survey;

(c) the number of fake doctors in Andhra Pradesh; and

(d) whether Government have issued any general guidelines to check activities of such fake doctors?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) No, Sir.

(b) Does not arise.

(c) No information is available.

(d) According to the provisions contained in the Indian Medical Council Act, 1956, the Indian Medicine Central Council Act, 1970 and Homoeopathy Central Council Act, 1973, no unregistered practitioner can practise medicine. Any person who acts in contravention of the provisions can be punished with imprisonment and fine under the respective Acts.

Revised rate of charges in AIIMS

3944. SHRI PARMESHWAR KUMAR AGARWALLA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state :

(a) whether Government are aware that AIIMS has raised charges for various medical tests and procedures being conducted at the hospital and its various centres, including C. N. Centre, Dr. Rajendra Prasad Centre and Dr. Ambedkar IRCH Centre;

(b) if so, the reasons therefor; and

(c) whether the revised rates have the approval of the Ministry?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) to (c) Yes, Sir. The All India Institute of Medical Sciences have revised the Charges for various Radio-diagnostic investigations in the AIIMS hospital and centres attached to it. The increase in fee has become necessary because the cost of consumables involved in those investigations have increased substantially in the last 10 years. While increasing the charges, efforts have been made to ensure that increases are kept at reasonable levels. The rates have been increased by the AIIMS in accordance with the in principle decision of the Standing Finance Committee/Governing Body/Institute Body of the Institute to rationalise the charges.